## Case 3:16-cv-00416-WJN Document 11 Filed 12/21/16 Page 1 of 1

USM-285 is a 5-part form: Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Servi

## PROCESS RECEIPT AND RETURN

Officed States Maismais Service See "Instruction	<u>is for Service of Process by U.S. Marshal"</u>
PLAINTIFF	COURT CASE NUMBER
United States of America	16-00416
ALLAN E. HAMILTON	TYPE OF PROCESS
NAME OF INDIVIDUAL, COMPLANY, DORPORATION ETC. TO SERVE OR D ALLAN E. HAMILTON	DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
ADDRESS (Street or RFD, Apartment No., City, State and ZIP code)	
96 Parsonage Street Newville, PA 17241	
SEND NOTICE OF SERVICE COPY OF REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
KML Law Group, P.C.	
701 Market Suite 5000	Number of parties to be served in this case
Philadelphia, PA 19106	Check for service on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING	G SERVICE (Include Business and Alternate Addresses,
All Telephone Numbers and Estimated Times Available for Service)  Minimum Bid; \$500 affached	
2 1 Detert The DUI Q 11:00 a	M. Cumberland Co.
Signature of Attorney other Originator requesting service behalf of:    Signature of Attorney other Originator requesting service behalf of:   PLAINTIFF	TELEPHONE NUMBER DATE
DEFENDANT	215-627-1322 9/13/16
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-DO	NOT WRITE BELOW THIS LINE
Lakknowledge receipt for the total   Total Process   District of   District to   Signature of Aut	norized USMS Deputy or Clerk Date
number of process indicated. Origin Serve	1/09/16
(Sign only for USM 285 if more than one USM 285 is submitted)  No. 67 No. 67	By SHC "19071C
I hereby certify and return that I $\square$ have personally served , $\square$ have legal evidence of service, $\bowtie$ have on the individual , company, corporation, etc., at the address shown above on the on the individual , corporation.	ave executed as shown in "Remarks", the process described inpany, corporation, etc. shown at the address inserted below.
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. nan	med above (See remarks below)
Name and title of individual served (if not shown above)	A person of suitable age and discretion
	then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date / Time
	12/8/246 1150 Fam
	Signature SUS Mershal or Deputy
	1/20
Service Fee Total Mileage Charges Forwarding Fee Total Charges Advance Deposi including orders ors.	its Amount owed to U.S. Marshal* or (Amount of Refund*)
\$6500 rough \$10.80 \$75.80	\$0.00 75.80
REMARKS:	30.00
HARRI	ISBURG, PA
RNATICE OUTS: 1. CLERK OF THE COURT 2. USMS RECORD	ISBURG, PA  2 1 2016 PRIOR EDITIONS MAY BE USED

- 3. NOTICE OF SERVICE
  4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
  5. ACKNOWLEDGMENT OF RECEIPT

Form USM-235 Rev. 12/30